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BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 9105

| | | | | |
|---|--|-------------------------------|---|--|
| SERIAL NUMBER 09/717,674 | FILING DATE 11/21/2000 RULE | CLASS 705 | GROUP ART UNIT 2165 | ATTORNEY DOCKET NO. 777.360US1 |
| APPLICANTS Steven J. Kruiy, Carnation, WA; Christopher G. Kaler, Redmond, WA; | | | | |
| ** CONTINUING DATA ***** | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/03/2001 | | | | |
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____ | STATE OR COUNTRY WA | SHEETS DRAWING 8 | TOTAL CLAIMS 39 INDEPENDENT CLAIMS 13 |
| ADDRESS Steven J. Rocci Woodcock Washburn Kurtz Mackiewicz & Norris LLP One Liberty Place- 46th Floor Philadelphia ,PA 19103 | | | | |
| TITLE Client-server communications system and method using a semi-connectionless protocol | | | | |
| FILING FEE RECEIVED 1852 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |



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|---|---|-------------------------------|---|--|
| SERIAL NUMBER 09/717,674 | FILING DATE 11/21/2000 RULE - | CLASS 705 | GROUP ART UNIT 2163 | ATTORNEY DOCKET NO. 777.360US1 |
| APPLICANTS Steven J. Kruij, Carnation, WA ; Christopher G. Kaler, Redmond, WA ; | | | | |
| ** CONTINUING DATA ***** | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/03/2001 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____ | | STATE OR COUNTRY WA | SHEETS DRAWING 8 | TOTAL CLAIMS 39 |
| | | | | INDEPENDENT CLAIMS 13 |
| ADDRESS 21186 | | | | |
| TITLE Client-server communications system and method using a semi-connectinless protocol | | | | |
| FILING FEE RECEIVED 1852 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |